



Patent
Attorney's Docket No. 032304-040

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of)	MS NON-FEE AMENDMENT
)	
John F. Shanley)	Group Art Unit: 3731
)	
Application No.: 10/057,414)	Examiner: Michael H. Thaler
)	
Filed: January 25, 2002)	Confirmation No.: 9725
)	
For: EXPANDABLE MEDICAL DEVICE)	
WITH TAPERED HINGE)	
)	

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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DEC 09 2003
TECHNOLOGY CENTER 1.3700

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ A Terminal Disclaimer and the ☐ \$55.00 (2814) ☐ \$110.00 (1814) fee due under 37 C.F.R. § 1.20(d) are also enclosed.
- ☐ Also enclosed is/are _____.
- ☐ Small entity status is hereby claimed.
- ☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$375.00 (2801) ☐ \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.
- ☐ Applicant(s) previously submitted ___, on ___, for which continued examination is requested.
- ☐ Applicant(s) requests suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.
- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below:

A M E N D E D C L A I M S					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADD'L FEE
Total Claims	37	MINUS 53 =	0	× \$18.00 (1202) =	0
Independent Claims	2	MINUS 7 =	0	× \$84.00 (1201) =	0
If Amendment adds multiple dependent claims, add \$280.00 (1203)					0
Total Claim Amendment Fee					0
If small entity status is claimed, subtract 50% of Total Claim Amendment Fee					0
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$0.00

☐ Charge \$_____ to Deposit Account No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

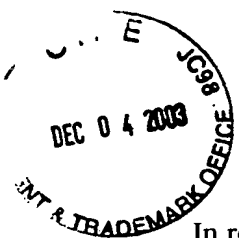
Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: December 3, 2003

By: 76 m. 2
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#1410
JK
12-11-03

AMENDMENT AND REPLY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Official Action dated September 4, 2003, please amend the
above-identified application as follows:

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